## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10764351

| CLAIMS AS FILED - PART I   |  |  |                                       |                                     |             |                  |          | SMALL ENTITY      |                        |         | OTHER THAN          |                        |
|--|--|--|---------------------------------------|-------------------------------------|-------------|------------------|----------|-------------------|------------------------|---------|---------------------|------------------------|
| TOTAL CLAIMS   |  |  | (Column 1)                            |                                     | (Column 2)  |                  | '        | TYPE              |                        | OR<br>7 | SMALL ENTITY        |                        |
| TOTALOBAMO   |  |  | 20                                    |                                     |             |                  |          | RATE              | FEE                    | 4       | RATE                | FEE ·                  |
| FOR  |  |  | NUMBER FILED                          |                                     | NUME        | BER EXTRA        |          | BASIÇ FEI         | 385.00                 | OR      | BASIC FEE           | 770.00                 |
| TC   | TAL CHARGE                                     | ABLE CLAIMS                                | 20 minus 20=                          |                                     | • Ø         |                  |          | XS 9=             | <u></u>                | OR      | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |  |                                       | inus 3 =                            | · ø         |                  |          | X43=              |                        | OR      | X86=                |                        |
| M  | JLTIPLE DEPE                                   | NDENT CLAIM P                              | RESENT                                |                                     | -           |                  |          | +145=             |                        | OR      | +290=               |                        |
| • 11   | the difference                                 | e in column 1 is                           | less than zero, enter "0" in column 2 |                                     |             |                  | _        | TOTAL             | 1                      | OR      | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  |  |  |                                       |                                     |             |                  |          |                   | 7                      | _       | OTHER               | THAN                   |
|  | 3-20-06  | (Column 1)                                 | (Column 2) (Column 3)                 |                                     |             |                  |          | SMALL             | ENTITY                 | OR      | SMALL               | ENTITY                 |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                       | HIGHE<br>NUME<br>PREVIO<br>PAID F   | BER<br>USLY | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | 2  | Minus                                 | <b>₩</b> 2.0                        |             | = /              |          | XS 9=             |                        | OR      | X\$18=              | /                      |
| AME  | independent                                    | . 1  | Minus                                 | *** 3                               |             |                  |          | X43=              | /                      | OR      | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                     |             |                  |          |                   |                        | OR      | +290=               |                        |
|  |  |  |                                       |                                     |             |                  | L        | +145=             |                        |         | TOTAL               |                        |
|  |  | AC   | DDIT. FEE                             |                                     | OR          | ADDIT. FEE       | <u> </u> |                   |                        |         |                     |                        |
|  |  | (Column 1) CLAIMS                          |                                       | (Colum<br>HIĞHE                     |             | (Column 3)       |          |                   | ADDI-                  | 1       |                     | ADDI-                  |
| AMENDMENT B  | ·  | REMAINING<br>AFTER<br>AMENDMENT            |                                       | NUMB<br>PREVIO<br>PAID F            | USLY        | PRESENT<br>EXTRA |          | RATE              | TIONAL<br>FEE          |         | RATE                | TIONAL<br>FEE          |
|  | Total .  | •  | Minus                                 | 44                                  |             | #                |          | XS 9= .           |                        | OR      | X\$18=              |                        |
|  | Independent                                    |  | Minus                                 | ***                                 |             |                  |          | X43=              |                        | OR      | X86=                |                        |
| `  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                     |             |                  |          |                   |                        | Ů.      |                     |                        |
|  |  |  |                                       |                                     |             |                  | Ľ        | +145=<br>TOTAL    |                        | OR      | +290=               | •                      |
|  |  |  |                                       |                                     |             |                  |          |                   | •                      | OR ,    | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |  |                                       |                                     |             |                  |          |                   |                        |         |                     |                        |
| AMENDMENT C  | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                       | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F | ER<br>JSLY  | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •  | Minus ··                              | **                                  |             | =                | ;        | X\$ 9=            |                        | OR      | X\$18=              |                        |
|  | Independent                                    |  | Minus                                 | ***                                 |             | 3                |          | X43=              |                        | ŀ       | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                     |             |                  |          |                   |                        | OR      | 700-                |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |  |                                       |                                     |             |                  |          |                   |                        | OR      | +290=<br>TOTAL      |                        |
| <b></b>  1   | the "Highest Nur                               | nber Previously Pai<br>mber Previously Pai | d For" IN THIS                        | SPACE is I                          | ess than    | 20, enter "20,"  | ADI      | TOTAL<br>DIT. FEE |                        | OR A    | DDIT. FEE           |                        |
| T  | he "Highest Num                                | ber Previously Paid                        | For (Total or                         | Independen                          | t) is the l | nighest number   | found    | in the appi       | opriate box            | in colu | mn 1.               |                        |